



MEMBERSHIP APPLICATION		
Name:		
Date of birth:		Phone:
Name:		
Date of birth:		Phone:
HOUSEHOLD INFORMATION		
Address:		
Email:	Preferred contact method:	
Pets:	Pets:	
Full time resident? Y N	Neighborhood:	
EMERGENCY CONTACT		
Name:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
ADDITIONAL CONTACT INFORMATION		
Name of a friend or relative not residing with you:		
Address:		Phone:
VILLAGE CONNECTIONS PAYMENT PLAN*		
Individual/Social/Household:	Monthly/Yearly Payment:	
SIGNATURES		
<p>I affirm the accuracy of the information provided on this form. I agree to hold Village Connections, their volunteers, officers, and board members harmless from and against any cost, expense, or damages (including attorney's fees) arising out of or in connection with any claims brought by me, on my behalf, or through me or my insurance carrier(s) relating to Village Connections.</p> <p>I recognize the need for an annual renewal and Village evaluation, updating of critical information, plus payment of the annual fee. I grant Village Connections permission to contact the above Emergency Contact(s). Having read the above I am pleased to become a Member of Village Connections.</p>		
Signature of applicant:		Date:
Signature of Village Connections Representative:		Date:

* Village Connections annual membership dues:

- Social Member: \$250 (tax-deductible, no services)
- Individual Members (not a member for at least 365 days): \$250
- Two-person Household: \$375

Dues are payable by check, credit card, or ACH. Payments may be made monthly or annually.